The above increase is in rupee fare levels commensurate with increase adopted by Indian Airlines only on the basic fare component of the domestic rupee fare. There is no increase in the US dollar domestic fares. Excess baggage charges have been increased by approximate 70 per cent and the same are also applicable on night fares.

Disparity in Pay structure of doctors

439. SHRI MAHENDRA PRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what decision has been taken on the Central Service Doctors' demand for bringing about a fair parity between their pay structure and that of other all India Services, looking to the fact that they for no fault of theirs have to enter services at least 2-3 years later in case of MB.B.S doctors and 4-5 years later in the case of Post graduate doctors, especially when they are required to render actual service in Government Hospitals right from internship onwards; and

(b) if no decision has yet been taken the reasons for the delay?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b). The Government has announced the following package after considering the demands of the doctors:—

(1) Medical Officers will get promotions to the post of Senior Medical Officer after completion of 5 years of service by suitable adjustment of cadre strength. Senior Medical Officer will enter the next grade of Chief Medical Officer after 9 years of service as Senior Medical Officer by providing adequate number of posts. The quota of non-functional selection grade post is to be increased from 20 to 30 per cent of the number of posts of Chief Medical Officers. Assistant Professor will be able to secure promotion as Associate Professor after 3 years and Associate Professor can hope to get a selection grade of Rs. 4500-5700 after 6 years of service. A new intermediate scale of Rs. 3700-5000 is being introduced for Specialist Grade-II Officers of Non-Teaching and Public Health Sub-cadre which they will be getting after 5 years of service. The Specialist Grade-II Officers in this Sub-cadre will be considered for placement in the scale of Rs. 4500-5700 after 9 years of service in Specialist Grade-II. All these placements in higher grades will be arranged by suitable restructuring of the Cadre.

(2) The Non-practising Allowance has been increased from Rs. 150 to Rs. 450 and from Rs. 600 to Rs. 900. The rate of Conveyance Allowance has also been increased. It has also been introduced for Specialists in hospitals. An Annual Allowance of Rs. 3000 for professional pursuits has been accepted for Specialists.

(3) A Cadre-review Committee has been set up to make recommendations for improving career progression of the officers in different Sub-cadres and various grades in these Sub-cadres including Supertime Grade.

The package will result in drawal of more emoluments by a central Health Service doctor than that of All India and other Central services officer upto first 15 years of service. Thereafter too, he will continue to draw more emoluments than other Central service officers.

Drugs under National Health Programme

440. SHRI RAJNI RANJAN SAHU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that his Ministry has drawn the list of drugs required for control of diseases under National Health Programmes;

(b) whether it is also a fact that most of the drugs have not been included in the list;

(c) if so, the reasons thereof;

(d) whether any committee was set up to draw this list;

(e) if so, names of the members along with designation of each;

(f) whether it is a fact that his Ministry has forwarded the list of Department of Chemicals for price control under category I;

(g) if so, by when those drugs will be announced for price control;

(h) whether Government is reconsidering the drugs which have been omitted for inclusion; and

(i) if so, by when the additional list will be forwarded?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (i) Essential Drug list which comprised the drugs required for diseases covered under National Health Programmes has not yet been finalised.

Marketing of Quadruple vaccine in India

441. SHRI RAJNI RANJAN SAHU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question 130 given in Rajya Sabha on 15th April, 1987 and state:

(a) whether quadruple vaccine is being marketed for the first time in the country;

(b) whether it is a fact that so far our country is concerned, it is treated to be new vaccine;

(c) if so, how food and drug Administration has granted the marketing permission of this vaccine in the counrry;

(d) what is the procedure for marketing of new vaccines and new drugs in the country;

(e) whether FDA Maharashtra has the authority to give marketing permission of new Drug and Vaccine; and

(f) if so, under what provision of Drugs and Cosmetics Act/Rules?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Sir. Food and Drug Administration, Maharashtra has granted licence for marketing of combination of DPT with injectionable polio.

(b) According to Drug Controller of India, it is to be treated as a new vaccine as quadruple vaccine is still under clinical trial.

(c) Food and Drug Administration, Maharashtra, has been requested to withdraw the permission granted to market this vaccine.

(d) The procedure for granting marketing permission of a new drug includes examination of pre-clinical and clinical data pertaining to the safety and efficacy of the drug, examination of local clinical trial reports in many cases and consultation with medical experts of different disciplines. The status of the drug in other countries, the recognition of the use of the drug in official books and journals also consitute criteria for clearance of new drugs.

(e) and (f) No, Sir.

Essential drugs at reasonable prices

442. SHRI RAJNI RANJAN SAHU: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government have drawn a list of essential drugs;

(b) if so, what is the total number of drugs;

(c) whether it is a fact that the list has been drawn with the purpose to make medicines based on these drugs freely available at reasonable prices;

(d) if so, whether Government have forwarded the list to Ministry of Industry for covering under price control; and

(e) if so, by when the same will be covered under price control and consumer can get at reasonable prices?